

**ANNUAL EXPENDITURES FOR MEDICAL SERVICES
BY MAJOR PROGRAM: FY 2003**

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Expenditure Category	All Medicaid Recipients	Recipients in MEDALLION I Program	Recipients in MEDALLION II Program	Recipients in Nursing Homes	Recipients in ICF-MR	Recipients in Elderly and Disabled Waiver	Recipients in AIDS Waiver	Recipients in Technology - Assisted Waiver	Recipients in Mental Retardation Waivers
Total claim-based payments:									
Inpatient Hospital	\$301,885,614	\$48,936,215	\$0	\$16,052,292	\$873,237	\$10,338,188	\$854,852	\$1,991,930	\$2,386,459
Outpatient Hospital	111,176,043	31,809,371	0	4,912,649	293,100	3,853,064	327,981	700,556	1,651,259
Nursing Facilities	545,409,057	(15)	0	549,415,835	24,145	2,723	142	0	0
Other Long-term Care	125,871,832	1,161,253	0	121,250	754	99,104,676	591,432	19,518,654	96,629
Mental Health									
DMHMRSAS Facilities	202,971,261	0	0	227,519,243	244,084,511	108,405	0	0	49,350
DMHMRSAS Community Programs	326,636,462	0	29,551,439	35	135,633	247	0	0	240,445,179
Non-State Mental Health Programs	108,275,248	0	9,379,331	19,941,262	9,423	16,353	1,858	176	234,940
Physicians	119,401,799	38,859,030	4,363	4,826,588	258,104	2,554,118	216,195	419,305	1,428,948
Prescribed Drugs	498,793,685	90,512,212	0	93,444,988	1,951,571	27,933,863	4,591,668	1,421,742	20,847,445
Managed Care									
Payments to HMOs	727,845,368	0	677,517,285	0	0	0	0	0	0
Management Fees to PCPs	2,479,425	0	0	0	0	0	0	0	0
All Other Services	145,349,192	31,782,596	2,169,158	7,335,268	153,860	11,397,742	939,155	3,826,606	4,466,715
Subtotal of claims-based payments	3,216,094,985	243,060,662	718,621,576	923,569,410	247,784,338	155,309,379	7,523,283	27,878,969	271,606,924
Lump-sum payments on MMIS:									
To Nursing Facilities	40,784,886	0	0	0	0	0	0	0	0
To DMHMRSAS Facilities	16,241,293	0	0	0	0	0	0	0	0
To ICF-MR-Community Facilities	36,147	0	0	1,614,553	0	0	0	0	0
To Private Mental Hospitals	4,200,961	0	(33)	997	0	1,325	150	14	12,251
To Inpatient Hospitals	86,151,699	13,965,349	0	4,580,981	0	2,950,298	243,956	568,454	681,044
To Enhanced Disproportionate Share	0	0	0	0	0	0	0	0	0
To Rehabilitation Agencies	1,015,694	529,559	0	37,606	0	21,682	114	25,736	71,950
To Rural Health Clinics	3,523,323	2,420,793	0	55,983	0	29,979	327	1,332	17,445
To Federally Qualified Health Centers	0	0	0	0	0	0	0	0	0
To Pharmacies	126,607	0	0	0	0	0	0	0	0
To Other Providers	41,664,460	0	0	0	0	0	0	0	0
Subtotal of lump-sum payments	193,745,070	16,915,701	(33)	6,290,121	0	3,003,284	244,548	595,537	782,690
Non-MMIS Payments/Recoveries:									
Enhanced Disproportionate Share	121,359,950	0	0	0	0	0	0	0	0
Medicare Premiums	90,894,139	0	0	N/A	N/A	N/A	N/A	N/A	N/A
Group Health Plan Payments (HIPP)	2,576,010	0	0	0	0	0	0	0	0
Drug Rebates	(73,263,453)	(13,294,549)	0	(13,725,319)	(286,649)	(4,102,961)	(674,430)	(208,827)	(3,062,099)
Other Payments/Recoveries	18,546,940	0	0	0	0	0	0	0	0
Subtotal of non-MMIS payments	160,113,586	(13,294,549)	0	(13,725,319)	(286,649)	(4,102,961)	(674,430)	(208,827)	(3,062,099)
Subtotal of Payments to Providers	3,569,953,641	246,681,814	718,621,543	916,134,211	247,497,689	154,209,701	7,093,401	28,265,679	269,327,515
Less: Enhanced Disproportionate Share	(121,359,950)	0	0	0	0	0	0	0	0
Net Payments to Providers	\$3,448,593,691	\$246,681,814	\$718,621,543	\$916,134,211	\$247,497,689	\$154,209,701	\$7,093,401	\$28,265,679	\$269,327,515
Average monthly recipients	458,418	68,873	246,594	17,563	1,862	7,837	319	278	5,511
Average cost per recipient	\$7,523	\$3,582	\$2,914	\$52,163	\$132,920	\$19,678	\$22,225	\$101,858	\$48,869
Average monthly eligibles	519,738								
Average cost per eligible	\$6,635								

Sources/Notes:

- (1) Claims payments from various SAS datasets.
- (2) Lump-sum payments from WMM820 reports and prorated to programs based upon claims payments
- (3) Non-MMIS payments/recoveries: DMAS Fiscal Unit reports.
- (4) Average monthly recipients from various SAS datasets.
- (5) All the columns in this report are independent of each other, therefore the rows are not additive.

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